

APPLICATION FOR BRITISH NATIONAL EMPLOYMENT WITH THE US GOVERNMENT

Title of Position Applie	d For		
Statemo	ents such as "any suita	ble position" are not acc	eptable
How did you hear of this	s vacancy		
Personal Data	<u>, , , , , , , , , , , , , , , , , , , </u>		
Surname		First Name	
Other names ever used			
Home Address			
	Post Code		
Telephone Number (Hor	ne		
Telephone Number (Bus		I	
Date of Birth	Pl	ace of Birth	
Nationality	Na	ational Insurance No.	
Are you available for ter	mporary employment la	esting:	
Less than 1 month		Yes	No
1 – 6 months		Yes	No
6 – 12 months		Yes	No
(Acceptance or refusal o		nt will not affect your coi tments)	nsideration for other ap-

How much notice do you have to give your employer

Give your reasons for applying				
Education Record				
Schools Attended:				
Name/Address	Dates	Results Attained		
Further Education – College/Un		1		
Name/Address	Dates	Results Attained		
Professional Qualifications Obt	ained.			
(state by examination, subscrip		ll details)		
(state by estation, states of	were eve. what provide jui			
Apprenticeship Details:				
Employer	Trade	Dates		

Please attach a copy of your indentured papers or evidence of your apprenticeship

Employment Record:

- Include all forms of employment, but state if the position was part time, seasonal etc.
- List employment (including military service and rank held at the time of discharge), beginning with the present or most recent position and work backwards

so will affect your appl proximately the same s		space is required, use full sheets of paper ap-
Name and Address of presen	t or most recent	employer:
Job Title		
Dates of Employment		
Brief Description of Duties:		
Salary/Benefits		
Reason for Leaving		
Previous Employment:		
Name and Address of Employe	er:	
Job Title		
Dates of Employment Brief Description of Duties		
3 333 F 333 32 2 4040		
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• Full details must be completed in all blocks of the Employment Records. Failure to do

Salary/Benefits		
Reason for Leaving		
Name and Address of Emplo	yer:	
Job Title		
Dates of Employment		
Brief Description of Duties		
	T	
Salary/Benefits		
Reason for Leaving		
Name and Address of Emplo	yer:	
Job Title		
Dates of Employment		
Brief Description of Duties		
Salary/Benefits		
	1	

Reason for Leaving			
Name and Address of Emplo	yer:		
Job Title			
Datas of Employment			
Dates of Employment Brief Description of Duties			
Salary/Benefits			
Reason for Leaving			
Answer all the following ques	stions:		
Have you ever been dismissed	from any job (exc	luding redundancy)	
or have you ever left voluntaril			Yes/No
ployers intended to discharge y	ou for any reason	. ?	
If YES, give the name and add separate sheet of paper.	ress of the employ	ver and the date and re	ason in each case, on a
separate sheet of paper.			
Have you grant 1	of once offered a	h on the on me :: 1	
Have you ever been convicted offences, by any Court or Cour	•	1 0	Yes/No
absolutely or conditionally disc		_	

If YES, give details of date, place of court hearing, nature of offence and sentence or order of the Court on a separate sheet of paper. NOTE: A "Yes" does not necessarily bar you from

employment as each case is treated on its own merits. You are not required to refer to any conviction which has become "Spent" under the Rehabilitation of Offenders Act 1974.

Are there any charges outstanding against you? i.e. yet to be disposed of?	Yes	No
If YES, please give details on a separate sheet of paper.		
Are you the subject of a Police investigation?	Yes	No
If YES, please give details on a separate sheet of paper.		
Do you have any contagious disease or do you suffer from any mental or physical defect or disability	Yes	No
TOTAL CONTROL OF THE		
If YES note that you may be required to accept a medical examination ployment or alternatively during your period of employment.	as a prerequis	ite to em-
, , , , , , , , , , , , , , , , , , ,	as a prerequis	ite to em-
ployment or alternatively during your period of employment.	Yes	No No
Ployment or alternatively during your period of employment. Number of sick days taken in the last 12 months Have you ever worked for this organisation, or any other US Agency	Yes	

If YES give details of such relative:

Name, Present address, Relationship to you, Department, Agency or Branch of the Armed Forces on a separate sheet of paper.

			_
May an inquiry be made of your present employer, regarding your			
character, qualifications and record of employment?	Yes	No	

A "NO" will not affect your consideration for employment opportunities except where an appointment is imminent.

Please supply details of 2 referees that can be contacted immediately when a suitable vacancy occurs and without further approval from yourself. Referees should not be any relation or relative and should be someone who knows you in a professional capacity. References will only be taken up if you are selected for a position and prior to appointment.

Reference 1

Name	Address
Telephone Number	
Relationship to Candidate	

Reference 2

Name	Address
Telephone Number	
Relationship to Candidate	

	Yes	No
Force?		

If YES, give full details on a separate sheet of paper

Office Skills:

Typing	WPM	Shorthand		WPM
Have you experience of	working with Software V	Word Processing		
and other ADP Equipm	ent?		Yes	No

If YES give details:		
Driving Ability:		
Do you possess a current driving licence (or are you eligible to obtain a current driving licence)?	Yes	No
Do you possess a current Forklift Operators Licence	Yes	No
Do you possess a current Crane Operators Licence	Yes	No
If YES to any items, what classes are you licensed to drive and the li authority?	censing or re	egistration
Before signing this application, you should carefully read the quest assure the accuracy, completeness and truthfulness of the informati or dishonest answer to any of the questions in this application may be eligible for employment or for dismissal after appointment. All state tigation. By signing this application form, you consent to the US A formation about you provided by you or by third parties, such as refection or future employment.	on you have be grounds for tements are s Army using a	e given. A false or rating you in- subject to inves- and keeping in-
APPLICATIONS WHICH ARE NOT PROPERLY SIGNED ARETURNED TO THE APPLICANT WITHOUT		
Certification.		
I certify that all of the statements made in this application and attache and correct to the best of my knowledge and belief and are made in g		e true, complete
Signature of Applicant:	Date:	

Please return the application form, to:-

Civilian Personnel Advisory Center
US Army Combat Equipment Battalion – Hythe.
Shore Road,
Hythe,
Southampton,
SO45 6ZD.

For Human Resource Office use only.